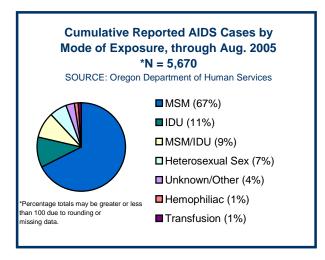
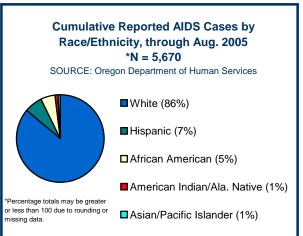


HIV/AIDS, STD & TB Prevention OREGON

HIV/AIDS Epidemic

Oregon reported 5,599 cumulative AIDS cases to CDC as of December 2003.





Sexually Transmitted Diseases (STDs)

Syphilis

Primary and secondary (P&S) syphilis (the stages when syphilis is most infectious) remains a problem in the southern U.S. and some urban areas. In Oregon, the

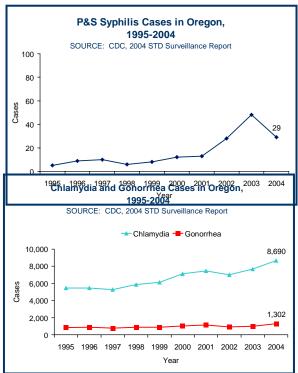
rate of P&S syphilis increased 300% from 1995-2004.

- Oregon ranked 35th among the 50 states with 0.8 cases of P&S syphilis per 100,000 persons.
- Between 1995 and 2004, Oregon reported 1 case of congenital syphilis, in 1997.

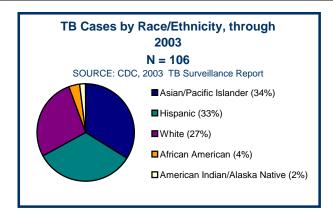
Chlamydia and Gonorrhea

Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease (PID), which can cause tubal infertility, ectopic pregnancy, and chronic pelvic pain.

- Oregon ranked 38th among the 50 states in chlamydial infections (244.1 per 100,000 persons) and 42nd in the rate of gonorrhea infections (36.6 per 100,000 persons).
- Rates of chlamydia among Oregon women (340 cases per 100,000 females) were 2.3 times greater than those among Oregon men (147 cases per 100,000 males).



Tuberculosis



Although rates of tuberculosis (TB) infection in the U.S. have declined substantially since 1992, rates among foreign-born persons continued to increase. In 2003, Oregon reported

- ☐ The 29th highest rate of TB in the U.S.
- □ A total of 106TB cases with 34% affecting Asian/Pacific Islanders and 33% affecting Hispanics. In all, about 63% were among foreign-born persons.

Program Initiatives Supported by CDC

Human Immunodeficiency Virus (HIV/AIDS)

Cascade AIDS Project, Inc. in Portland, Oregon, received funding in the 2004 community-based program announcement under Category B, organizations providing HIV prevention services to members of groups at high risk for HIV infection, regardless of race/ethnicity. The organization specifically targets youth with information and skills needed to prevent HIV. The organization also educates providers and adults in talking to youth about HIV.

Sexually Transmitted Diseases (STDs)

Oregon has reported annual increases in the number of fluoroquinolone-drug resistant gonorrhea cases since 2000, and the percentage of fluoroquinolone-resistant isolates in 2004 was 11.4%.

National Center for HIV, STDs & TB Prevention Funding to Oregon, 2005 (US\$)	
HIV/AIDS	\$4,221,479
STDs	\$1,435,838
ТВ	\$569,734

Although most cases have been among men who have sex with men (MSM) in metro Portland, sporadic fluoroquinolone treatment failures in heterosexual men and women indicate resistance may be expanding into the wider community. In October 2005, the STD Program, the STD/HIV/TB Epidemiologist and the Oregon Department of Health State Epidemiologist recommended fluoroquinolones no longer be used for gonorrhea therapy in Oregon.

Tuberculosis (TB)

The paramount goal of TB control programs is to ensure that patients complete their prescribed course of treatment. Federal funding is utilized by local health departments in Oregon to provide incentives to TB patients to assist them in completing their treatment. Examples of incentives are: funds to purchase nutritional supplements for malnourished patients, payment of rent so families are not evicted because an infectious family member is prohibited from working (they are usually day-laborer type employees without sick leave or other benefits), payment of utility bills to keep electricity or natural gas on during winter, free transportation to clinics, food, clothing, and facilitating treatment for mental illness or substance abuse.

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